

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	244392US8DIV
First Inventor or Application Identifier	Keiichi YABUSAKI
Title	SEMICONDUCTOR DEVICES, AND METHODS OF MANUFACTURE OF THE SAME

PTO-14  
10/03/03  
103003

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	
2. <input checked="" type="checkbox"/> Specification	Total Sheets <span style="border: 1px solid black; padding: 2px;">22</span>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets <span style="border: 1px solid black; padding: 2px;">13</span>
4. <input checked="" type="checkbox"/> Oath or Declaration	Total Pages <span style="border: 1px solid black; padding: 2px;">4</span>
a. <input type="checkbox"/> Newly executed (original or copy)	
b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).	
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
ii. <input type="checkbox"/> Paper	
c. <input type="checkbox"/> Statements verifying identity of above copies	

Commissioner for Patents  
ADDRESS TO: Mail Stop Patent Application  
Alexandria, Virginia 22313

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**ACCOMPANYING APPLICATION PARTS**

7. <input checked="" type="checkbox"/> Assignment @ Reel/Frame 012770/0861	
8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	
9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
10. <input checked="" type="checkbox"/> Request for Priority	
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
12. <input checked="" type="checkbox"/> Revocation and New Appointment of Power of Attorney	
13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard	
14. <input checked="" type="checkbox"/> Confirmation of Attorney and Correspondence Address	
15. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	
16. <input type="checkbox"/> Other:	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation     Divisional     Continuation-in-part (CIP)

of prior application no.: 10/003,748, filed on  
October 23, 2001

Prior application information: Examiner: WILLE, DOUGLAS A.

Group Art Unit: 2814

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

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Signature:	<i>Bradley D. Lytle</i>	Date:	10/20/03
Name:		Registration No.:	

BDL:fbl

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Docket No. 244392US8DIV

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Keiichi YABUSAKI, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: SEMICONDUCTOR DEVICES, AND METHODS OF MANUFACTURE OF THE SAME

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	13 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$86 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
			BASIC FEE	\$770.00
			TOTAL OF ABOVE CALCULATIONS	\$770.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
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			TOTAL	\$770.00

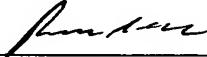
Please charge Deposit Account No. 15-0030 in the amount of      A duplicate copy of this sheet is enclosed.

A check in the amount of      to cover the filing fee is enclosed.

Credit card payment form is attached to cover the filing fee in the amount of **\$770.00**

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLOON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.Date: 10/30/03  
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